

B6A (Official Form 6A) (12/07)

In re: William D Johnson Denise C Johnson

Debtors

Case No. _____

(If known)

SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
2075 Spooky Nook Road, Mount Joy, Pennsylvania 17552	Tenants by Entireties	J	\$ 240,000.00	\$ 250,201.00
Total >			\$ 240,000.00	

(Report also on Summary of Schedules.)

In re William D Johnson Denise C Johnson

Case No. _____
 (If known)

Debtors

SCHEDULE B - PERSONAL PROPERTY

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		M&T Checking Account	J	4.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		DVD player	J	90.00
Household goods and furnishings, including audio, video, and computer equipment.		Household furniture	J	250.00
Household goods and furnishings, including audio, video, and computer equipment.		Television sets (x2)	J	180.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing	J	600.00
7. Furs and jewelry.		Neckless, earring	J	40.00
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<input checked="" type="checkbox"/>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<input checked="" type="checkbox"/>			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<input checked="" type="checkbox"/>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<input checked="" type="checkbox"/>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<input checked="" type="checkbox"/>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<input checked="" type="checkbox"/>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<input checked="" type="checkbox"/>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<input checked="" type="checkbox"/>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2004 Jeep Cherokee	J	4,500.00
Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Dodge Durango	J	9,500.00
26. Boats, motors, and accessories.	<input checked="" type="checkbox"/>			
27. Aircraft and accessories.	<input checked="" type="checkbox"/>			
28. Office equipment, furnishings, and supplies.	<input checked="" type="checkbox"/>			
29. Machinery, fixtures, equipment and supplies used in business.	<input checked="" type="checkbox"/>			
30. Inventory.	<input checked="" type="checkbox"/>			
31. Animals.	<input checked="" type="checkbox"/>			
32. Crops - growing or harvested. Give particulars.	<input checked="" type="checkbox"/>			
33. Farming equipment and implements.	<input checked="" type="checkbox"/>			
34. Farm supplies, chemicals, and feed.	<input checked="" type="checkbox"/>			
35. Other personal property of any kind not already listed. Itemize.	<input checked="" type="checkbox"/>			

In re William D Johnson Denise C JohnsonCase No. _____
(If known)

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Total >				\$ 15,164.00

2 continuation sheets attached(Include amounts from any continuation sheets
attached. Report total also on Summary of
Schedules.)

In re William D Johnson Denise C Johnson
Debtors

Case No. _____
(if known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

☐ Check if debtor claims a homestead exemption that exceeds
\$146,450.*

- ☒ 11 U.S.C. § 522(b)(2)
☐ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
2004 Jeep Cherokee	11 USC § 522(d)(2)	100.00	4,500.00
2007 Dodge Durango	11 USC § 522(d)(5)	3,000.00	9,500.00
	11 USC § 522(d)(2)	6,800.00	
Clothing	11 USC § 522(d)(3)	600.00	600.00
DVD player	11 USC § 522(d)(5)	90.00	90.00
Household furniture	11 USC § 522(d)(5)	250.00	250.00
Neckless, earring	11 USC § 522(d)(4)	40.00	40.00
Television sets (x2)	11 USC § 522(d)(5)	180.00	180.00

* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re William D Johnson Denise C Johnson

Case No. _____

(If known)

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. xxxxxxxx1111**** Fulton Bank 1695 State Street East Petersburg, PA 17520	J	12/26/2007 Security Agreement 2007 Dodge Durango VALUE \$9,500.00				900.00	900.00
ACCOUNT NO. xxxxxxxxxx0000 Lancaster County Treasurer 150 North Queen Street PO Box 1447 Lancaster, PA 17606 Hempfield School District 200 Church Street Landisville, PA 17538	J	Judgment Lien 2075 Spooky Nook Road, Mount Joy, Pennsylvania 17552 VALUE \$240,000.00				4,200.00	0.00
ACCOUNT NO. xxxxxxxxx2219 OCWEN Loan Servicing, LLC 1661 Worthington Road STE 100 West Palm Beach, FL 33409 HSBC Bank USA Attn: Bankruptcy Dept. P.O. Box 5213 Carol Stream, IL 60197 Urden Law Offices, P.C. 111 Woodcrest Road Ste 200 Cherry Hill, NJ 08003	J	Mortgage 2075 Spooky Nook Road, Mount Joy, Pennsylvania 17552 VALUE \$240,000.00				246,000.00	6,000.00

1 continuation sheets attached

Subtotal >
(Total of this page)

Total >
(Use only on last page)

\$ 251,100.00	\$ 6,900.00
\$	\$

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson Case No. _____
 Debtors (If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. xxxxxx0817**** Westlake Financial Services 4751 Wilshire Blvd. Ste 100 Los Angeles, CA 90010	J	01/05/2011 2004 Jeep Cherokee VALUE \$4,500.00				4,400.00	4,400.00

Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal >
(Total of this page)

Total >
(Use only on last page)

\$ 4,400.00	\$ 4,400.00
\$ 255,500.00	\$ 11,300.00

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Debtors

Case No. _____
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

In re William D Johnson Denise C Johnson

Debtors

Case No. _____

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. xxxxxxxx0000 Hempfield School District 200 Church Street Landisville, PA 17538		J	01/01/2012 Local Taxes				1,175.00	1,175.00	\$0.00
ACCOUNT NO. xxx-xxxxx-x-0000 Lancaster County Tax Claim Bureau 150 N. Queen Street, Ste 122 Lancaster, PA 17608-1447		J	01/01/2011 Real Estate Taxes				8,616.02	8,616.02	\$0.00

Sheet no. 1 of 1 continuation sheets attached to Schedule of
 Creditors Holding Priority Claims

Subtotals >
 (Totals of this page)

Total >
 (Use only on last page of the completed
 Schedule E. Report also on the Summary of
 Schedules.)

Total >
 (Use only on last page of the completed
 Schedule E. If applicable, report also on the
 Statistical Summary of Certain Liabilities and
 Related Data.)

\$ 9,791.02	\$ 9,791.02	\$ 0.00
\$ 9,791.02		
	\$ 9,791.02	\$ 0.00

In re **William D Johnson Denise C Johnson**

Debtors

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. XXXXXXXX Anesthesia Assoc. of Lancaster 133 E. Frederick Street Lancaster, PA 17602 National Recovery Agency NRA GROUP, LLC. dba National Recove 2491 Paxton Street Harrisburg, PA 17111	J	10/08/2010 Medical treatment				892.00
ACCOUNT NO. xxxx2883 Asset Acceptance LLC PO Box 2036 Warren, MI 48090-2036	J					12,315.02
ACCOUNT NO. xxxxxxxx0147**** AT&T Mobility 208 South Akard Street, #110 Dallas, TX 75202 Delmarva Collection PO Box 37 Salisbury, MD 21803	J	12/24/2009 Phone service			X	740.00

14 Continuation sheets attached

Subtotal > \$ **13,947.02**

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx7392 AT&T Mobility 208 South Akard Street, #110 Dallas, TX 75202 Bureau of Collection Recovery, LLC 7575 Corporate Way Eden Prairie, MN 55344	J	Phone service			X	670.55
ACCOUNT NO. xxxx1577 AT&T Mobility 208 South Akard Street, #110 Dallas, TX 75202 EOS CCA 700 Longwater Drive Norwell, MA 02061	W	08/01/2012 Phone service			X	1,185.00
ACCOUNT NO. xxxxxxxxxxxx3224 Capital One P.O. Box 30285 Salt Lake City, UT 84130 Portfolio Recovery Associates, LLC PO Box 4115 Concord, CA 94524	J	Credit account				718.21

14 Continuation sheets attached

Sheet no. 1 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal >	\$	2,573.76
Total >	\$	

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Debtors

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	DEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxxxxxx3224 Capital One P.O. Box 30285 Salt Lake City, UT 84130 Portfolio Recovery & Affiliates 120 Corporate Boulevard Norfolk, VA 23502	J	Credit card			X	900.00
ACCOUNT NO. xxxxxxxxxxxx3773 Credit One Bank PO Box 98872 Las Vegas, NV 89193 LVNV Funding, LLC PO Box 10497 Greenville, SC 29603 Allied Interstate 3000 Corporate Exchange Drive 5th Floor Columbus, OH 43231	W	10/01/2007 Credit card			X	916.94
ACCOUNT NO. xxxxS048 Crystal Pools, Inc. 4175 Roundtop Road Elizabethtown, PA 17022 National Recovery Agency 2491 Paxton Street Harrisburg, PA 17111	J	06/04/2012 Pool service				110.00

14 Continuation sheets attached

Sheet no. 2 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **1,926.94**

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxx0315 Elizabethtown Family Health Center 300 Maytown Road Elizabethtown, PA 17022 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	08/01/2011 Medical treatment			X	76.00
ACCOUNT NO. xxxxxxxxx6629 Elizabethtown Family Physicians PO Box 729 East Petersburg, PA 17520 Credit Bureau of Lancaster Co. PO Box 1271 Lancaster, PA 17608	H	Medical Treatment			X	180.00
ACCOUNT NO. xxxxxxxxxxxxx3303 First Bank of Delaware 1000 Rocky Run Pkwy. Wilmington, DE 19803 Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123	J	Credit account			X	557.21
ACCOUNT NO. xxxxxxxxxxxxx2215 First National Bank 600 E. 60th Street N. Sioux Falls, SD 57104	J	08/01/2007 Credit card			X	353.00

14 Continuation sheets attached

Sheet no. 3 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority ClaimsSubtotal > \$ **1,166.21**

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxxxxxx7872 First Premier Bank 601 South Minnesota Avenue Sioux Falls, SD 57104 Asset Acceptance LLC PO Box 2036 Warren, MI 48090-2036	J	Credit Card			X	683.41
ACCOUNT NO. xxHWI1 Franklin H. Kreider 2400 Dairy Road Lancaster, PA 17601	J	10/05/2010 Fuel oil				395.00
ACCOUNT NO. J Heisey Oil PO Box 7 Rheems, PA 17570	J	02/18/2012 Fuel Oil				558.95
ACCOUNT NO. xxx6228 Home One Handyman Services 2600 Lititz Pike Lancaster, PA 17601 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	J	04/01/2008 Services			X	330.00

14 Continuation sheets attached

Sheet no. 4 of 14 continuation sheets attached to Schedule of Creditors
 Holding Unsecured
 Nonpriority Claims

Subtotal > \$ **1,967.36**

Total > \$

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable on the Statistical
 Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx0946 HSBC Bank Nevada, N.A. Attn: Bankruptcy Dept. 1111 North Town Center Drive Las Vegas, NV 89144 LVNV Funding, LLC PO Box 10497 Greenville, SC 29603	J	03/01/2009 Credit card			X	529.00
ACCOUNT NO. xxxxxxxx6239 HSBC Bank Nevada, N.A. Attn: Bankruptcy Dept. 1111 North Town Center Drive Las Vegas, NV 89144 Cavalry Portfolio Services 500 Summit Lake Drive Ste 4A Valhalla, NY 10595	W	10/01/2007 Individual account			X	690.00
ACCOUNT NO. xxxxxxxxxxxx0659 HSBC Bank Nevada, N.A. Attn: Bankruptcy Dept. 1111 North Town Center Drive Las Vegas, NV 89144 Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123	J	Individual account			X	800.00

14 Continuation sheets attached

Sheet no. 5 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **2,019.00**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re **William D Johnson Denise C Johnson**

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx3370xxxx HSBC Bank Nevada, N.A. Attn: Bankruptcy Dept. 1111 North Town Center Drive Las Vegas, NV 89144 Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123		J	02/01/2010				1.00
ACCOUNT NO. xxxxxxxx1157**** HSBC Card Services Attn: Bankruptcy Dept. P.O. Box 5213 Carol Stream, IL 60197 Cavalry Portfolio Services 500 Summit Lake Drive Ste 4A Valhalla, NY 10595		J	12/29/2006 Credit card			X	1.00
ACCOUNT NO. xxxxxxxx0037**** HSBC Card Services Attn: Bankruptcy Dept. P.O. Box 5213 Carol Stream, IL 60197 Noram Capital Holdings 15303 North Dallas Parkway Ste 1030 Addison, TX 75001		J	11/13/2007 Credit card			X	1.00

14 Continuation sheets attached

Sheet no. 6 of 14 continuation sheets attached to Schedule of Creditors
 Holding Unsecured
 Nonpriority Claims

Subtotal > \$ **3.00**

Total >

\$

(Use only on last page of the completed Schedule F.)
 (Report also on Summary of Schedules and, if applicable on the Statistical
 Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx0791**** HSBC Card Services Attn: Bankruptcy Dept. P.O. Box 5213 Carol Stream, IL 60197 Portfolio Recovery & Affiliates 120 Corporate Boulevard Norfolk, VA 23502	J	01/16/2007 Credit Card			X	1.00
ACCOUNT NO. xxxx131-1 LA Weight Loss Center PO Box 297 Hatboro, PA 19040	W	Fitness membership				198.00
ACCOUNT NO. xxx5918 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	08/01/2007 Medica treatment			X	40.00
ACCOUNT NO. xxx5133 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	J	07/01/2012				303.00
ACCOUNT NO. xxx6409 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	10/01/1011 Medical treatment			X	36.00

14 Continuation sheets attached

Sheet no. 7 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority ClaimsSubtotal > \$ **578.00**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Debtors

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxx8531 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	09/01/2011 Medical treatment			X	198.00
ACCOUNT NO. xxx2381 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	05/01/2011 Medical treatment			X	188.00
ACCOUNT NO. xxxx2381 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	06/01/2011 Medical treatment			X	277.00
ACCOUNT NO. xxx7764 Lancaster Collections 218 W. Orange Street Lancaster, PA 17603	H	08/01/2011 Medical treatment			X	16.00

14 Continuation sheets attached

Sheet no. 8 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **679.00**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re **William D Johnson Denise C Johnson**

Debtors

Case No. _____

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CREDITOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxx6416	H	09/01/2010			X	530.00
Lancaster General Hospital P.O. Box 3555 Lancaster, PA 17604 Financial Recoveries 200 E Park Drive Ste 100 Mount Laurel, NJ 08054		Medical treatment				
ACCOUNT NO. xxxxxxxx8625	H					483.00
Lancaster General Hospital PO Box 3077 Lancaster, PA 17604		Medical treatment				
ACCOUNT NO. xxxxxxxx01-40	H	10/14/2011			X	530.00
Lancaster General Physicians PO Box 3077 Lancaster, PA 17604 Financial Recoveries PO Box 1022 Wixom, MI 48393		Medical treatment				
ACCOUNT NO. xxxxxxxx4431	J	12/01/2008			X	914.00
LVNV Funding, LLC PO Box 10497 Greenville, SC 29603						

14 Continuation sheets attached

Sheet no. 9 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **2,457.00**

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx4061 LVNV Funding, LLC PO Box 10497 Greenville, SC 29603	J	04/08/2011 Credit card			X	594.00
ACCOUNT NO. ****2983 MCI Communications Services, Inc. 22001 Loudoun County Parkway Ashburn, VA 20147 LVNV Funding P.O. Box 10587 Greenville, SC 29603 Northland Group, Inc. PO Box 390856 Minneapolis, MN 55439	J				X	546.93
ACCOUNT NO. xx3263**** Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123	J	09/08/2009 Credit card			X	554.00
ACCOUNT NO. xx3182**** Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123	J	09/09/2008 Credit card			X	1,030.00

14 Continuation sheets attached

Sheet no. 10 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **2,724.93**

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re **William D Johnson Denise C Johnson**

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBATOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xx3263xxxx Midland Credit Management 8875 Aero Drive Suite 200 San Diego CA 92123		W	Credit card			X	1.00
ACCOUNT NO. xxxx9252 Milton Hershey Medical Center PO Box 643291 Pittsburgh, PA 15264		H	07/09/2012 Medical treatment				8,523.65
ACCOUNT NO. xxxxxxxx9252 Penn State Hershey Medical Attn: Patient Financial Services PO Box 854 Mail Code A410 Hershey, PA 17033		J	07/09/2012 Medical Treatment				8,523.65
ACCOUNT NO. xxxx4488 Penn State Hershey Medical Attn: Patient Financial Services PO Box 854 Mail Code A410 Hershey, PA 17033 Bureau of Account Management 3607 Rosemont Ave. Ste 502 PO Box 8875 Camp Hill, PA 17001		H	Medical Treatment				51,240.58

14 Continuation sheets attached

Sheet no. 11 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **68,288.88**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re **William D Johnson Denise C Johnson**

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxxxx9570 Penn State Hershey Medical Center Attn: Patient Financial Services PO Box 854 Mail Code A410 Hershey, PA 17033 Bureau of Account Mangement 3607 Rosemont Ave Ste 502 Camp Hill, PA 17001-8875	H	Medical treatment			X	35,520.03
ACCOUNT NO. xxxx9306 Penn State Hershey Medical Center Attn: Patient Financial Services PO Box 854 Mail code A410 Hershey, PA 17033 Bureau of Account Management 3607 Rosemont Ave. Ste 502 PO Box 8875 Camp Hill, PA 17001	H	Medical treatment			X	30,531.66
ACCOUNT NO. xxxxx-x3017 PPL 2 North 9th Street Allentown, PA 18101-1175	J	11/01/2012 Utilities			X	360.14
ACCOUNT NO. xxxx5534 The Ashton Drake Galleries 9200 North Maryland Ave. Niles, IL 60714	W	09/01/2010 Purchases			X	30.00

14 Continuation sheets attached

Sheet no. 12 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal >

\$ **66,441.83**

Total >

\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, If applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

Debtors

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xx4431xxxx Verizon P.O. Box 105378 Alpharetta, GA 30348 AFNI PO Box 3097 Bloomington, IL 61702	W	12/01/2010 Phone service			X	238.00
ACCOUNT NO. xx9001xxxx Verizon 500 Technology Drive Ste 300 Weldon Spring, MO 63304	H	08/01/2009 Phone service			X	121.00
ACCOUNT NO. xx5901xxxx Verizon Pennsylvania, Inc. 900 Race Street Philadelphia, PA 19107	W	01/01/2008 Utility service			X	148.00
ACCOUNT NO. xxxxxxxx5877 Verizon Pennsylvania, Inc. 900 Race Street Philadelphia, PA 19107 AFNI, Inc. 1310 Martin Luther Drive PO Box 3427 Bloomington, IL 61702	J	Utilities			X	238.00

14 Continuation sheets attached

Sheet no. 13 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal > \$ **745.00**

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re William D Johnson Denise C Johnson

Case No. _____

(If known)

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. xxxxxx8806xxxx Verizon Pennsylvania, Inc. 900 Race Street Philadelphia, PA 19107	H	12/01/2009 Utilities			X	200.00
ACCOUNT NO. xxxxxxxxxxxx0001 Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002 Sunrise Credit Services, Inc. PO Box 9168 Farmingdale, NY 11735	J	Phone/internet service				1,604.00
ACCOUNT NO. xxxxxxxx0088**** Web Bank 8405 SW Nimbus Ave, Ste A Beaverton, OR 97008 Web Bank 6440 S. Wasatch Blvd. Ste 300 Salt Lake City, UT 84121	J	03/15/2006 Credit card			X	1.00

14 Continuation sheets attached

Sheet no. 14 of 14 continuation sheets attached to Schedule of Creditors
Holding Unsecured
Nonpriority Claims

Subtotal >

\$ 1,805.00

Total >

\$ 167,322.93

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re: William D Johnson Denise C Johnson Case No. _____
Debtors (if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Dougla L. Zook 480 Running Pump Road Lancaster, PA 17601	Housing rental

In re: **William D Johnson Denise C Johnson**
Debtors

Case No. _____
(If known)

SCHEDULE H - CODEBTORS

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
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Debtors

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Married	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S):	AGE(S):
	Son	17
	Son	4
Employment: DEBTOR		SPOUSE
Occupation Laborer		Nurse
Name of Employer Hoover Feed Mills		Merle Breneman
How long employed 6 months		4 years
Address of Employer 3216 Mill Lane Gordonville, PA 17529		East Main Street, Mount Joy, PA 17552

INCOME: (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly.)	\$ <u>2,000.00</u>	\$ <u>2,730.00</u>
2. Estimate monthly overtime	\$ <u>600.00</u>	\$ <u>0.00</u>
3. SUBTOTAL	\$ <u>2,600.00</u>	\$ <u>2,730.00</u>
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$ <u>502.00</u>	\$ <u>130.00</u>
b. Insurance	\$ <u>0.00</u>	\$ <u>0.00</u>
c. Union dues	\$ <u>0.00</u>	\$ <u>0.00</u>
d. Other (Specify) Federal taxes	\$ <u>90.61</u>	\$ <u>0.00</u>
FICA - Medicare	\$ <u>18.63</u>	\$ <u>0.00</u>
Local taxes	\$ <u>12.85</u>	\$ <u>0.00</u>
State taxes	\$ <u>39.44</u>	\$ <u>0.00</u>
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>663.53</u>	\$ <u>130.00</u>
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>1,936.47</u>	\$ <u>2,600.00</u>
7. Regular income from operation of business or profession or farm (Attach detailed statement)	\$ <u>0.00</u>	\$ <u>0.00</u>
8. Income from real property	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.	\$ <u>0.00</u>	\$ <u>0.00</u>
11. Social security or other government assistance (Specify)	\$ <u>0.00</u>	\$ <u>0.00</u>
12. Pension or retirement income	\$ <u>0.00</u>	\$ <u>0.00</u>
13. Other monthly income (Specify)	\$ <u>0.00</u>	\$ <u>0.00</u>

Debtors

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

14. SUBTOTAL OF LINES 7 THROUGH 13

\$	0.00	\$	0.00
\$	1,936.47	\$	2,600.00
\$ 4,536.47			

15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)

16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15)

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

NONE

In re William D Johnson Denise C Johnson
Debtors

Case No. _____
(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>1,300.00</u>
a. Are real estate taxes included? Yes _____ No <u>✓</u>		
b. Is property insurance included? Yes _____ No <u>✓</u>		
2. Utilities: a. Electricity and heating fuel	\$	<u>291.00</u>
b. Water and sewer	\$	<u>0.00</u>
c. Telephone	\$	<u>200.00</u>
d. Other <u>Cable Service</u>	\$	<u>200.00</u>
<u>Trash Service</u>	\$	<u>40.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>0.00</u>
4. Food	\$	<u>500.00</u>
5. Clothing	\$	<u>200.00</u>
6. Laundry and dry cleaning	\$	<u>0.00</u>
7. Medical and dental expenses	\$	<u>200.00</u>
8. Transportation (not including car payments)	\$	<u>0.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>0.00</u>
10. Charitable contributions	\$	<u>0.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>148.00</u>
b. Life	\$	<u>0.00</u>
c. Health	\$	<u>230.00</u>
d. Auto	\$	<u>170.00</u>
e. Other	\$	<u>0.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <u>Local taxes</u>	\$	<u>416.66</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>700.00</u>
b. Other	\$	<u>0.00</u>
14. Alimony, maintenance, and support paid to others	\$	<u>0.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>0.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other	\$	<u>0.00</u>
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	<u>4,595.66</u>

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	<u>4,536.47</u>
b. Average monthly expenses from Line 18 above	\$	<u>4,595.66</u>
c. Monthly net income (a. minus b.)	\$	<u>-59.19</u>

B6 Summary (Official Form 6 - Summary) (12/07)

**United States Bankruptcy Court
Eastern District of Pennsylvania**

In re William D Johnson Denise C Johnson
Debtors

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 240,000.00		
B - Personal Property	YES	3	\$ 15,164.00		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	2		\$ 255,500.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 9,791.02	
F - Creditors Holding Unsecured Nonpriority Claims	YES	15		\$ 167,322.93	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 4,536.47
J - Current Expenditures of Individual Debtor(s)	YES	1			\$ 4,595.66
TOTAL		29	\$ 255,164.00	\$ 432,613.95	

**United States Bankruptcy Court
Eastern District of Pennsylvania**

In re **William D Johnson Denise C Johnson**
Debtors

Case No. _____
Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 9,791.02
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E.	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 9,791.02

State the following:

Average Income (from Schedule I, Line 16)	\$ 4,536.47
Average Expenses (from Schedule J, Line 18)	\$ 4,595.66
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 5,330.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 11,300.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 9,791.02	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 167,322.93
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 178,622.93